

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

**SOUTHERN DISTRICT OF NEW YORK**

Case number (if known): \_\_\_\_\_ Chapter you are filing under:

Chapter 7  
 Chapter 11  
 Chapter 12  
 Chapter 13

Check if this is an  
amended filing

**Official Form 101****Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for

**Part 1: Identify Yourself**

	<b>About Debtor 1:</b>	<b>About Debtor 2 (Spouse Only in a Joint Case):</b>
<b>1. Your full name</b>	<p>Write the name that is on your government-issued picture identification (for example, your driver's license or passport).</p> <p><b>Angel</b> First Name</p> <p><b>L.</b> Middle Name</p> <p><b>Moina</b> Last Name</p>	<p><b>Jennifer</b> First Name</p> <p><b>Janet</b> Middle Name</p> <p><b>Moina</b> Last Name</p>
Bring your picture	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
<b>2. All other names you have used in the last 8 years</b>	<p>First Name</p> <p>Middle Name</p> <p>Last Name</p>	<p>First Name</p> <p>Middle Name</p> <p>Last Name</p>
Include your married or maiden names.		
<b>3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)</b>	<p>XXX - XX - <u>8</u> <u>5</u> <u>4</u> <u>8</u></p> <p>OR</p> <p>9XX - XX - _____</p>	<p>XXX - XX - <u>6</u> <u>1</u> <u>4</u> <u>4</u></p> <p>OR</p> <p>9XX - XX - _____</p>
<b>4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years</b>	<p><input checked="" type="checkbox"/> I have not used any business names or EINs <input checked="" type="checkbox"/> I have not used any business names or EINs.</p> <p>Business name</p> <p>Business name</p> <p>Business name</p> <p>Business name</p>	
Include trade names and doing business as	<p>Business name</p> <p>Business name</p> <p>Business name</p>	

**About Debtor 1:**

EIN \_\_\_\_\_

EIN \_\_\_\_\_

**About Debtor 2 (Spouse Only in a Joint Case):**

EIN \_\_\_\_\_

EIN \_\_\_\_\_

**5. Where you live**

**628 W. 151st Street**

Number Street

**Apt. 4D**

**New York NY 10031**

City State ZIP Code

**New York**

County

**If your mailing address is different from the one above, fill it in here.** Note that the court will send any notices to you at this mailing address.

**628 W. 151st Street**

Number Street

**Apt. 4D**

P.O. Box

**New York NY 10031**

City State ZIP Code

**New York NY 10031**

City State ZIP Code

**New York**

County

**If Debtor 2's mailing address is different from yours, fill it in here.** Note that the court will send any notices to you at this mailing address.

**628 W. 151st Street**

Number Street

**Apt. 4D**

P.O. Box

**New York NY 10031**

City State ZIP Code

**6. Why you are choosing this district to file for bankruptcy**

**Check one:**

Over the last 180 days before filing this petition, I have lived in this district

I have another reason. Explain. (See 28 U.S.C. § 1408.)

**Check one:**

Over the last 180 days before filing this petition, I have lived in this district

I have another reason. Explain. (See 28 U.S.C. § 1408.)

**Part 2: Tell the Court About Your Bankruptcy Case**

**7. The chapter of the Bankruptcy Code you are choosing to file under**

**Check one:** (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010). Also, go to the top of page 1 and check the appropriate box.)

- Chapter 7
- Chapter 11
- Chapter 12
- Chapter 13

8. How you will pay the fee

**I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your

**I need to pay the fee in installments.** If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).

**I request that my fee be waived.** You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the

9. Have you filed for bankruptcy within the last 8 years?

No

Yes.

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
 MM / DD / YYYY

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
 MM / DD / YYYY

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
 MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

No

Yes.

Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number, \_\_\_\_\_  
 MM / DD / YYYY if known

Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number, \_\_\_\_\_  
 MM / DD / YYYY if known

11. Do you rent your residence?

No. Go to line 12.

Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your

No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You  
 (Form 101A)

**Part 3: Report About Any Businesses You Own as a Sole Proprietor**

**12. Are you a sole proprietor of any full- or part-time business?**

No. Go to Part 4.  
 Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one

Name of business, if any

Number Street

City

State

ZIP Code

*Check the appropriate box to describe your business:*

Health Care Business (as defined in 11 U.S.C. § 101(27A))  
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
 Stockbroker (as defined in 11 U.S.C. § 101(53A))  
 Commodity Broker (as defined in 11 U.S.C. § 101(6))  
 None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

*If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).*

No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

**Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**

**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs**

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs*

No  
 Yes. What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number Street

City

State

ZIP Code

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices.

If you cannot do so, you are not eligible to file.

**About Debtor 1:**

*You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received

Attach a copy of the certificate and the payment plan, if any, that you developed with the

I received a briefing from an approved credit counseling agency within the 180 days before

I filed this bankruptcy petition, but I do not

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file.

You must file a certificate from the approved agency, along with a copy of the payment plan

I am not required to receive a briefing about credit counseling because of:

**Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or

**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received

Attach a copy of the certificate and the payment plan, if any, that you developed with the

I received a briefing from an approved credit counseling agency within the 180 days before

I filed this bankruptcy petition, but I do not

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file.

You must file a certificate from the approved agency, along with a copy of the payment plan

I am not required to receive a briefing about credit counseling because of:

**Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or

**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the

**Part 6: Answer These Questions for Reporting Purposes**

16. What kind of debts do you have?

16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

No. Go to line 16b.  
 Yes. Go to line 17.

16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

No. Go to line 16c.  
 Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer or business debts.

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17. Are you filing under Chapter 7?

No. I am not filing under Chapter 7. Go to line 18.

Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

No  
 Yes

18. How many creditors do you estimate that you owe?

<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input type="checkbox"/> 50-99	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

19. How much do you estimate your assets to be worth?

<input checked="" type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

20. How much do you estimate your liabilities to be?

<input type="checkbox"/> \$0-\$50,000	<input checked="" type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

**Part 7: Sign Below**

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this

**X /s/ Angel L. Moina**

Signature of Debtor 1

Executed on **01/31/2016**

MM / DD / YYYY

**X /s/ Jennifer Janet Moina**

Signature of Debtor 2

Executed on **01/31/2016**

MM / DD / YYYY

For your attorney, if you are represented by one

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about

If you are not represented by an attorney, you do not need to file this page.

eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to

**X** /s/ Victor J. Molina Date 01/31/2016  
Signature of Attorney for Debtor MM / DD / YYYY

**Victor J. Molina**

Printed name

**Law Office of Victor J. Molina**

Firm Name

**930 Grand Concourse**

Number Street

**Bronx**

City

**NY**

State

**10451**

ZIP Code

Contact phone (718) 401-1600

Email address v.j.molina@verizon.net

**NY**

Bar number

State

Fill in this information to identify your case and this filing:

Debtor 1	<b>Angel</b> First Name	<b>L.</b> Middle Name	<b>Moina</b> Last Name
Debtor 2	<b>Jennifer</b> (Spouse, if filing) First Name	<b>Janet</b> Middle Name	<b>Moina</b> Last Name
United States Bankruptcy Court for the <b>SOUTHERN DISTRICT OF NEW YORK</b>			
Case number (if known)			

Check if this is an amended filing

Official Form 106A/B

**Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every

**Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.  
 Yes. Where is the property?

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. → \$0.00

**Part 2: Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on **Schedule G: Executory Contracts and Unexpired Leases**.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No  
 Yes

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  
Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No  
 Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here. → \$0.00

**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

No  
 Yes. Describe Used furniture, appliances

\$1,200.00

Debtor 1 Angel L. Moina Pg 9 of 56 Case number (if known) \_\_\_\_\_

**7. Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No

Yes. Describe Used Television, radio, computer

\_\_\_\_\_ \$800.00

**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No

Yes. Describe \_\_\_\_\_

**9. Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No

Yes. Describe \_\_\_\_\_

**10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

Yes. Describe \_\_\_\_\_

**11. Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No

Yes. Describe Used men's women's children's clothing

\_\_\_\_\_ \$1,100.00

**12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

Yes. Describe \_\_\_\_\_

\_\_\_\_\_ \$1,000.00

**13. Non-farm animals**

Examples: Dogs, cats, birds, horses

No

Yes. Describe \_\_\_\_\_

**14. Any other personal and household items you did not already list, including any health aids you did not list**

No

Yes. Give specific information.....

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here.....** → \$4,100.00

\_\_\_\_\_ \$4,100.00

**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

**16. Cash**

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

Yes..... Cash: ..... \$800.00

Debtor 1 Angel L. Moina Pg 10 of 56 Case number (if known) \_\_\_\_\_

**17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No

Yes.....

Institution name:

**18. Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

No

Yes.....

Institution or issuer name:

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**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

No

Yes. Give specific Name of entity:  
information about  
them.....

% of ownership:

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**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.  
*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

No

Yes. Give specific Issuer name:  
information about  
them.....

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**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

Yes. List each Type of account: Institution name:  
account separately, 401(k) or similar plan:

Pension plan: \_\_\_\_\_

IRA: \_\_\_\_\_

Retirement account: \_\_\_\_\_

Keogh: \_\_\_\_\_

Additional account: \_\_\_\_\_

Additional account: \_\_\_\_\_

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company  
*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes.....

Institution name or individual:

Debtor 1 Angel L. Moina Pg 11 of 56 Case number (if known) \_\_\_\_\_

First Name Middle Name Last Name

**23. Annuities** (A contract for a specific periodic payment of money to you, either for life or for a number of years)

No

Yes..... Issuer name and description:

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**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

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**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

No

Yes. Give specific information about them

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them

**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them

**Money or property owed to you?**

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Federal: \$0.00

State: \$0.00

Local: \$0.00

**29. Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

Yes. Give specific information

Alimony: \$0.00

Maintenance: \$0.00

Support: \$0.00

Divorce settlement: \$0.00

Property settlement: \$0.00

Debtor 1 Angel L. Moina Pg 12 of 56 Case number (if known) \_\_\_\_\_

First Name Middle Name Last Name

**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

Yes. Give specific information \_\_\_\_\_

**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company name: \_\_\_\_\_ Company name: \_\_\_\_\_

Beneficiary: \_\_\_\_\_ Surrender or refund value: \_\_\_\_\_

Company of each policy and list its value..... \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

No

Yes. Give specific information \_\_\_\_\_

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No

Yes. Describe each claim \_\_\_\_\_

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

No

Yes. Describe each claim \_\_\_\_\_

**35. Any financial assets you did not already list**

No

Yes. Give specific information \_\_\_\_\_

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here. →**

\$800.00

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?**

No. Go to Part 6.

Yes. Go to line 38.

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

**38. Accounts receivable or commissions you already earned**

No

Yes. Describe \_\_\_\_\_

**39. Office equipment, furnishings, and supplies**

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

No

Yes. Describe \_\_\_\_\_

Debtor 1 Angel L. Moina Pg 13 of 56 Case number (if known) \_\_\_\_\_

First Name Middle Name Last Name

**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**

No  
 Yes. Describe \_\_\_\_\_

**41. Inventory**

No  
 Yes. Describe \_\_\_\_\_

**42. Interests in partnerships or joint ventures**

No  
 Yes. Describe Name of entity: \_\_\_\_\_ % of ownership: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**43. Customer lists, mailing lists, or other compilations**

No  
 Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  
 No  
 Yes. Describe \_\_\_\_\_

\_\_\_\_\_

**44. Any business-related property you did not already list**

No  
 Yes. Give specific information..... \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here..... →**

**\$0.00**

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.**

**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

No. Go to Part 7.  
 Yes. Go to line 47.

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**47. Farm animals**

Examples: Livestock, poultry, farm-raised fish

No  
 Yes.. \_\_\_\_\_

Debtor 1 Angel L. Moina Pg 14 of 56 Case number (if known) \_\_\_\_\_

First Name Middle Name Last Name

**48. Crops--either growing or harvested**

No \_\_\_\_\_  
 Yes. Give specific information.....

**49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

No \_\_\_\_\_  
 Yes..

**50. Farm and fishing supplies, chemicals, and feed**

No \_\_\_\_\_  
 Yes..

**51. Any farm- and commercial fishing-related property you did not already list**

No \_\_\_\_\_  
 Yes. Give specific information.....

**52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here.....** → \$0.00

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above****53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

No \_\_\_\_\_  
 Yes. Give specific information.....  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**54. Add the dollar value of all of your entries from Part 7. Write that number here.....** → \$0.00

**Part 8: List the Totals of Each Part of this Form**

**55. Part 1: Total real estate, line 2.....** → \$0.00

**56. Part 2: Total vehicles, line 5** \$0.00

**57. Part 3: Total personal and household items, line 15** \$4,100.00

**58. Part 4: Total financial assets, line 36** \$800.00

**59. Part 5: Total business-related property, line 45** \$0.00

**60. Part 6: Total farm- and fishing-related property, line 52** \$0.00

**61. Part 7: Total other property not listed, line 54** \$0.00

**62. Total personal property** Add lines 56 through 61..... \$4,900.00 Copy personal property total → \$4,900.00

**63. Total of all property on Schedule A/B** Add line 55 + line 62..... \$4,900.00

Debtor 1 Angel L. Moina Pg 15 of 56 Case number (if known) \_\_\_\_\_

First Name Middle Name Last Name

## Fill in this information to identify your case:

Debtor 1	<b>Angel</b> First Name	<b>L.</b> Middle Name	<b>Moina</b> Last Name
Debtor 2	<b>Jennifer</b> (Spouse, if filing) First Name	<b>Janet</b> Middle Name	<b>Moina</b> Last Name
United States Bankruptcy Court for the <b>SOUTHERN DISTRICT OF NEW YORK</b>			
Case number (if known) _____			

Check if this is an amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on **Schedule A/B: Property** (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many **Supplemental Additional Pages** as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so

is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of

## Part 1: Identify the Property You Claim as Exempt

## 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on **Schedule A/B** that you claim as exempt, fill in the information below.

Brief description of the property and line on <b>Schedule A/B</b> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
--	--------------------------------------	-----------------------------------	------------------------------------

Copy the value from **Schedule A/B** for **Check only one box**

Brief description: Used furniture, appliances  
Line from **Schedule A/B:** 6  
Current value: \$1,200.00  
Amount of the exemption you claim:  \$1,200.00  
 100% of fair market value, up to any

Brief description: Used Television, radio, computer  
Line from **Schedule A/B:** 7  
Current value: \$800.00  
Amount of the exemption you claim:  \$800.00  
 100% of fair market value, up to any

## 3. Are you claiming a homestead exemption of more than \$155,675?

(Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.)

No  
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
 No  
 Yes

**Part 2: Additional Page**

**Brief description of the property and line on Schedule A/B that lists this property**      **Current value of the portion you own**      **Amount of the exemption you claim**      **Specific laws that allow exemption**

Copy the value from *Check only one box*  
*Schedule A/B* for

Brief Used men's women's  
description: children's clothing      **\$1,100.00**       **\$1,100.00**      N.Y. CPLR § 5205(a)  
Line from  
*Schedule A/B:* 11       100% of fair  
market  
value, up to any

Brief Watch, rings, costume jewelry      **\$1,000.00**       **\$1,000.00**  
description:  
Line from  
*Schedule A/B:* 12       100% of fair  
market  
value, up to any

Brief Emergency funds      **\$800.00**       **\$800.00**  
description:  
Line from  
*Schedule A/B:* 16       100% of fair  
market  
value, up to any

## Fill in this information to identify your case:

Debtor 1	<b>Angel</b> First Name	<b>L.</b> Middle Name	<b>Moina</b> Last Name
Debtor 2	<b>Jennifer</b> (Spouse, if filing) First Name	<b>Janet</b> Middle Name	<b>Moina</b> Last Name
United States Bankruptcy Court for the <b>SOUTHERN DISTRICT OF NEW YORK</b>			
Case number (if known)			

Check if this is an amended filing

## Official Form 106D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form.

## 1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in

Column A	Column B	Column C
Amount of claim	Value of collateral	Unsecured portion
Do not deduct the value of collateral that supports this claim		If any

Add the dollar value of your entries in Column A on this page. Write that number here:

**\$0.00**

## Fill in this information to identify your case:

Debtor 1	<b>Angel</b> First Name	<b>L.</b> Middle Name	<b>Moina</b> Last Name
Debtor 2	<b>Jennifer</b> (Spouse, if filing) First Name	<b>Janet</b> Middle Name	<b>Moina</b> Last Name
United States Bankruptcy Court for the <b>SOUTHERN DISTRICT OF NEW YORK</b>			
Case number (if known)			<input type="checkbox"/> Check if this is an amended filing

## Official Form 106E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed on *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

## 1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.  
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

Debtor 1 Angel L. Moina Pg 20 of 56 Case number (if known) \_\_\_\_\_

First Name Middle Name Last Name

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with you other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.**

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim,

**Total claim**

**4.1**

**\$59,000.00**

142 BROADWAY ASSOCIATES, L.L.C.

Nonpriority Creditor's Name

c/o HEIBERGRR & ASSOCIATES, P.C.

Number Street

589 Eighth Avenue, 10th floor

New York NY 10018

City State ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Check if this claim is for a community debt

Last 4 digits of account number O R E 5

When was the debt incurred? 2013

As of the date you file, the claim  Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce  
 that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Commercial Rent, Fees

**Is the claim subject to offset?**

No  
 Yes

**4.2**

**\$41,000.00**

3480-3496 Broadway Assoc.

Nonpriority Creditor's Name

c/o Cullen & Troia, P.C.

Number Street

2 Rector Street, Ste. 903

New York NY 10006

City State ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Check if this claim is for a community debt

Last 4 digits of account number O R E 6

When was the debt incurred? 2011

As of the date you file, the claim  Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce  
 that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Commercial Rent, Fees--La Posada

**Is the claim subject to offset?**

No  
 Yes

Debtor 1 Angel L. Moina Pg 21 of 56 Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

**4.3**

**\$2,784.00**

**AMERICAN EXPRESS**

Nonpriority Creditor's Name

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Check if this claim is for a community debt**

Last 4 digits of account number 2 5 7 7

When was the debt incurred? 10/1/2008

As of the date you file, the claim is:

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card

**Is the claim subject to offset?**

No  
 Yes

**4.4**

**\$2,025.00**

**CAPITAL ONE**

Nonpriority Creditor's Name

**26525 N RIVERWOODS BLVD**

Number Street \_\_\_\_\_

**Lake Forest** **IL** **60045**  
 City State ZIP Code \_\_\_\_\_

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Check if this claim is for a community debt**

Last 4 digits of account number 3 4 7 3

When was the debt incurred? More than 10

As of the date you file, the claim is:

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card

**Is the claim subject to offset?**

No  
 Yes

**4.5**

**\$10,896.00**

**CAPITAL ONE BANK USA N**

Nonpriority Creditor's Name

**15000 CAPITAL ONE DR**

Number Street \_\_\_\_\_

**Henrico** **VA** **23238**  
 City State ZIP Code \_\_\_\_\_

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Check if this claim is for a community debt**

Last 4 digits of account number 1 3 7 7

When was the debt incurred? 4/1/2012

As of the date you file, the claim is:

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card

**Is the claim subject to offset?**

No  
 Yes

Debtor 1 Angel L. Moina Pg 22 of 56 Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

**4.6**

**\$5,998.00**

**CHASE CARD**  
Nonpriority Creditor's Name  
**PO Box 15298**

Number Street

**Wilmington DE 19850**  
City State ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Check if this claim is for a community debt**

Last 4 digits of account number 8 4 1 2

When was the debt incurred? 6/1/2005

As of the date you file, the claim is:

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card

**Is the claim subject to offset?**

No  
 Yes

**4.7**

**\$11,639.00**

**CHASE CARD**  
Nonpriority Creditor's Name  
**PO BOX 15298**

Number Street

**Wilmington DE 19850**  
City State ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Check if this claim is for a community debt**

Last 4 digits of account number 8 4 1 2

When was the debt incurred? 10/1/2008

As of the date you file, the claim is:

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Non-Purchase Money

**Is the claim subject to offset?**

No  
 Yes

**4.8**

**\$104,603.00**

**GIBLIN & LYNCH**  
Nonpriority Creditor's Name  
**10 Garber Square**

Number Street  
**Ste. 2**

**Ridgewood NJ 07450**  
City State ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Check if this claim is for a community debt**

Last 4 digits of account number 1 0 0 0

When was the debt incurred? 2014

As of the date you file, the claim is:

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Attorney for - Collection

**Is the claim subject to offset?**

No  
 Yes

Debtor 1 Angel L. Moina Pg 23 of 56 Case number (if known) \_\_\_\_\_

First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

**4.9**

**\$400.00**

Nonpriority Creditor's Name  
**9111 DUKE BLVD**

Number Street

**Mason** OH **45040**

City State ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Check if this claim is for a community debt**

Last 4 digits of account number X X X X

When was the debt incurred? 12/1/2004

As of the date you file, the claim  Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card

**Is the claim subject to offset?**

No  
 Yes

**4.10**

**\$10,783.00**

Nonpriority Creditor's Name  
**New York and Presbyterian Hospital**

Number Street  
**161 Fort Washington Ave # 206**

**New York** NY **10032**

City State ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Check if this claim is for a community debt**

Last 4 digits of account number           

When was the debt incurred? 1/30/2013

As of the date you file, the claim  Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Medical

**Is the claim subject to offset?**

No  
 Yes

**4.11**

**\$41,452.00**

Nonpriority Creditor's Name  
**New York State Tax and Finance**

Number Street  
**Building 9**  
**W,A, Harriman Campus**

**Albany** NY **12229**

City State ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Check if this claim is for a community debt**

Last 4 digits of account number 3 7 8 0

When was the debt incurred? 7/8/2014

As of the date you file, the claim  Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Taxes

**Is the claim subject to offset?**

No  
 Yes

Debtor 1 Angel L. Moina Pg 24 of 56 Case number (if known) \_\_\_\_\_

First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.12	\$259,864.00
<p><b>New York State Tax and Finance</b></p> <p>Nonpriority Creditor's Name <b>Building 9</b></p> <p>Number Street <b>W,A, Harriman Campus</b></p> <p>Albany NY 12229</p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b> <input checked="" type="checkbox"/> Other. Specify <u>Taxes</u></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	
<p>Last 4 digits of account number <u>4 6 3 2</u></p> <p>When was the debt incurred? <u>11/6/2013</u></p> <p>As of the date you file, the claim <input checked="" type="checkbox"/> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <u>Taxes</u></p>	
4.13	\$5,338.00
<p><b>New York State Tax and Finance</b></p> <p>Nonpriority Creditor's Name <b>Building 9</b></p> <p>Number Street <b>W,A, Harriman Campus</b></p> <p>Albany NY 12229</p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b> <input checked="" type="checkbox"/> Other. Specify <u>Taxes</u></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	
<p>Last 4 digits of account number <u>                  </u></p> <p>When was the debt incurred? <u>11/6/2013</u></p> <p>As of the date you file, the claim <input checked="" type="checkbox"/> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <u>Taxes</u></p>	
4.14	\$27,914.00
<p><b>New York State Tax and Finance</b></p> <p>Nonpriority Creditor's Name <b>Building 9</b></p> <p>Number Street <b>W.A. Harriman Campus</b></p> <p>Albany NY 12229</p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input checked="" type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b> <input checked="" type="checkbox"/> Other. Specify <u>Taxes</u></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	
<p>Last 4 digits of account number <u>0 7 5 5</u></p> <p>When was the debt incurred? <u>7/29/2014</u></p> <p>As of the date you file, the claim <input checked="" type="checkbox"/> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <u>Taxes</u></p>	

Debtor 1 Angel L. Moina Pg 25 of 56 Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.15		\$5,338.00
<b>New York State Tax and Finance</b> Nonpriority Creditor's Name <b>Building 9</b> Number Street <b>W.A. Harriman Campus</b> Albany NY 12229 City State ZIP Code		Last 4 digits of account number <u>4 6 3 4</u> When was the debt incurred? <u>11/6/2013</u> As of the date you file, the claim <input checked="" type="checkbox"/> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <input checked="" type="checkbox"/> Other. Specify <u>Taxes</u>		
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.16		\$74,000.00
<b>NEW YORK STATE WORKERS' COMPENSATION</b> Nonpriority Creditor's Name <b>FINANCE OFFICE. ASSESSMENT UNIT</b> Number Street <b>328 STATE ST. RM 331</b> City State ZIP Code		Last 4 digits of account number <u>6 1 6 4</u> When was the debt incurred? <u>9/2014</u> As of the date you file, the claim <input checked="" type="checkbox"/> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <input checked="" type="checkbox"/> Other. Specify <u>Workers Comp. Assessment-La Po</u>		
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.17		\$1,479,698.42
<b>NYS DEPT OF LABOR</b> Nonpriority Creditor's Name <b>Averell Harriman State Office Campus</b> Number Street <b>Building 12, Room 116</b> Albany NY 12240 City State ZIP Code		Last 4 digits of account number <u>                  </u> When was the debt incurred? <u>07/25/2013</u> As of the date you file, the claim <input checked="" type="checkbox"/> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> <b>Check if this claim is for a community debt</b> <input checked="" type="checkbox"/> Other. Specify <u>Judgment--Wage and Hour case</u>		
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.18	\$2,471.00	
<b>PORTFOLIO RECOVERY ASS</b>		
Nonpriority Creditor's Name		
<b>120 CORPORATE BLVD STE 1</b>		
Number	Street	
<b>Norfolk</b>	<b>VA</b>	<b>23502</b>
City	State	ZIP Code
<b>Who incurred the debt?</b> Check one.		
<input checked="" type="checkbox"/> Debtor 1 only	Last 4 digits of account number <u>3 4 7 3</u>	
<input type="checkbox"/> Debtor 2 only	When was the debt incurred? <u>9/1/2012</u>	
<input type="checkbox"/> Debtor 1 and Debtor 2 only	As of the date you file, the claim is:	
<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Contingent	
<input type="checkbox"/> <b>Check if this claim is for a community debt</b>	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
<b>Type of NONPRIORITY unsecured claim:</b>		
<input type="checkbox"/> Student loans		
<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
<b>Is the claim subject to offset?</b>		
<input checked="" type="checkbox"/> No		
<input type="checkbox"/> Yes		

Debtor 1 Angel  
First NameL.  
Middle NameMoina  
Last Name

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Case number (if known) \_\_\_\_\_

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.  
28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

	<b>Total claim</b>
Total claims from Part 1	6a. <u>Domestic support obligations</u> <u>6a. \$0.00</u>
	6b. <u>Taxes and certain other debts you owe the government</u> <u>6b. \$0.00</u>
	6c. <u>Claims for death or personal injury while you were intoxicated</u> <u>6c. \$0.00</u>
	6d. <u>Other</u> . Add all other priority unsecured claims. Write that amount here <u>6d. + \$0.00</u>

6e. <b>Total</b> . Add lines 6a through 6d.	6d. <u>\$0.00</u>
---	-------------------

	<b>Total claim</b>
Total claims from Part 2	6f. <u>Student loans</u> <u>6f. \$0.00</u>
	6g. <u>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</u> <u>6g. \$0.00</u>
	6h. <u>Debts to pension or profit-sharing plans, and other similar debts</u> <u>6h. \$0.00</u>
	6i. <u>Other</u> . Add all other nonpriority unsecured claims. Write that amount here <u>6i. + \$2,145,203.42</u>
6j. <b>Total</b> . Add lines 6f through 6i.	<u>\$2,145,203.42</u>

## Fill in this information to identify your case:

Debtor 1	<b>Angel</b> First Name	<b>L.</b> Middle Name	<b>Moina</b> Last Name
Debtor 2	<b>Jennifer</b> (Spouse, if filing) First Name	<b>Janet</b> Middle Name	<b>Moina</b> Last Name
United States Bankruptcy Court for the <b>SOUTHERN DISTRICT OF NEW YORK</b>			
Case number (if known)		<input type="checkbox"/> Check if this is an amended filing	

## Official Form 106G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this

## 1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below even if the contracts or leases listed in Schedule A/B: Property (Official Form 106A/B).

## 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease State what the contract or lease is for

## Fill in this information to identify your case:

Debtor 1	<b>Angel</b> First Name	<b>L.</b> Middle Name	<b>Moina</b> Last Name
Debtor 2	<b>Jennifer</b> (Spouse, if filing) First Name	<b>Janet</b> Middle Name	<b>Moina</b> Last Name
United States Bankruptcy Court for the <b>SOUTHERN DISTRICT OF NEW YORK</b>			
Case number (if known)		<input type="checkbox"/> Check if this is an amended filing	

## Official Form 106H

**Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible.

If

two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)
 

No  
 Yes
2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
 

No. Go to line 3.  
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
 

No  
 Yes
3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G all out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

## Fill in this information to identify your case:

Debtor 1	<b>Angel</b> First Name	<b>L.</b> Middle Name	<b>Moina</b> Last Name
Debtor 2 (Spouse, if filing)	<b>Jennifer</b> First Name	<b>Janet</b> Middle Name	<b>Moina</b> Last Name
United States Bankruptcy Court for the <b>SOUTHERN DISTRICT OF NEW YORK</b>			
Case number (if known)			

Check if this is:

An amended filing

A supplement showing postpetition chapter 13 income as of the following date:  
\_\_\_\_\_  
MM / DD / YYYY

## Official Form 106I

## Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write

## Part 1: Describe Employment

## 1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

	<b>Debtor 1</b>	<b>Debtor 2 or non-filing spouse</b>		
<b>Employment status</b>	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed		
<b>Occupation</b>	<u>D.J.</u>	<u>Cashier</u>		
<b>Employer's name</b>	<u>Tequila Song Corp.</u>			
<b>Employer's address</b>	<u>2856 Webster Avenue</u> Number Street	<u>2856 Webster Avenue</u> Number Street		
	<u>Bronx</u> City	<u>NY</u> <u>10458</u> State Zip Code	<u>Bronx</u> City	<u>NY</u> <u>10458</u> State Zip Code

How long employed there? 3 months2 years

## Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this ~~fbymu~~ have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If

	<b>For Debtor 1</b>	<b>For Debtor 2 or non-filing spouse</b>
<b>2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.</b>	<u>2.</u> <u>\$1,600.00</u>	<u>\$1,600.00</u>
<b>3. Estimate and list monthly overtime pay.</b>	<u>3. +</u> <u>\$0.00</u>	<u>\$0.00</u>
<b>4. Calculate gross income</b> <small>Add line 2 + line 3.</small>	<u>4.</u> <u>\$1,600.00</u>	<u>\$1,600.00</u>

Debtor 1 Angel L. Moina Pg 31 of 56 Case number (if known) \_\_\_\_\_

	For Debtor 1	For Debtor 2 or non-filing spouse
<b>Copy line 4 here .....</b>	→ 4. <u>\$1,600.00</u>	<u>\$1,600.00</u>
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. <u>\$100.00</u>	<u>\$258.60</u>
5b. Mandatory contributions for retirement plans	5b. <u>\$0.00</u>	<u>\$0.00</u>
5c. Voluntary contributions for retirement plans	5c. <u>\$0.00</u>	<u>\$0.00</u>
5d. Required repayments of retirement fund loans	5d. <u>\$0.00</u>	<u>\$0.00</u>
5e. Insurance	5e. <u>\$0.00</u>	<u>\$0.00</u>
5f. Domestic support obligations	5f. <u>\$0.00</u>	<u>\$0.00</u>
5g. Union dues	5g. <u>\$0.00</u>	<u>\$0.00</u>
5h. Other deductions. Specify: _____	5h.+ <u>\$0.00</u>	<u>\$0.00</u>
<b>6. Add the payroll deductions</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 6. 5g + 5h.	<u>\$100.00</u>	<u>\$258.60</u>
<b>7. Calculate total monthly take-home pay</b> Subtract line 6 from line 4.7.	<u>\$1,500.00</u>	<u>\$1,341.40</u>
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a Attach a statement for each property and business showing gross receipts, ordinary and necessary business	8a. <u>\$0.00</u>	<u>\$0.00</u>
8b. Interest and dividends	8b. <u>\$0.00</u>	<u>\$0.00</u>
8c. Family support payments that you, a non-filing spouse, or a Include alimony, spousal support, child support, maintenance,	8c. <u>\$0.00</u>	<u>\$0.00</u>
8d. Unemployment compensation	8d. <u>\$0.00</u>	<u>\$0.00</u>
8e. Social Security	8e. <u>\$0.00</u>	<u>\$0.00</u>
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Specify: <u>USDA SNAP</u>	8f. <u>\$0.00</u>	<u>\$429.00</u>
8g. Pension or retirement income	8g. <u>\$0.00</u>	<u>\$0.00</u>
8h. Other monthly income. Specify: _____	8h.+ <u>\$0.00</u>	<u>\$0.00</u>
<b>9. Add all other income</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	<u>\$0.00</u>	<u>\$429.00</u>
<b>10. Calculate monthly income</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. <u>\$1,500.00</u>	+ <u>\$1,770.40</u> = <u>\$3,270.40</u>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.		
Specify: _____	11. + <u>\$0.00</u>	<u>\$3,270.40</u>
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.		<b>Combined monthly income</b>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>	<input checked="" type="checkbox"/> No. <u>None.</u> <input type="checkbox"/> Yes. Explain: _____	

## Fill in this information to identify your case:

Debtor 1	<b>Angel</b> First Name	<b>L.</b> Middle Name	<b>Moina</b> Last Name
Debtor 2 (Spouse, if filing)	<b>Jennifer</b> First Name	<b>Janet</b> Middle Name	<b>Moina</b> Last Name
United States Bankruptcy Court for the <b>SOUTHERN DISTRICT OF NEW YORK</b>			
Case number (if known) _____			

Check if this is:

An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

**Schedule J: Your Expenses**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write

**Part 1: Describe Your Household**

## 1. Is this a joint case?

No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?  
 No  
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

## 2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

 No Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Daughter	15	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Son	4	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes

## 3. Do your expenses include expenses of people other than yourself and your dependents?

No  
 Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4. The rental or home ownership expenses for your residence.  
Include first mortgage payments and any rent for the ground or lot.**Your expenses**4. \$1,960.00

## If not included in line 4:

4a. Real estate taxes  
 4b. Property, homeowner's, or renter's insurance  
 4c. Home maintenance, repair, and upkeep expenses  
 4d. Homeowner's association or condominium dues

4a. \_\_\_\_\_  
 4b. \_\_\_\_\_  
 4c. \_\_\_\_\_  
 4d. \_\_\_\_\_

Debtor 1 Angel

First Name

L.

Middle Name

Moina

Last Name

Case number (if known) \_\_\_\_\_

Your expenses**5. Additional mortgage payments for your residence, as home equity loans**

5. \_\_\_\_\_

**6. Utilities:**

6a. Electricity, heat, natural gas

6a. **\$125.00**

6b. Water, sewer, garbage collection

6b. \_\_\_\_\_

6c. Telephone, cell phone, Internet, satellite, and cable services

6c. **\$150.00**

6d. Other. Specify: \_\_\_\_\_

6d. \_\_\_\_\_

**7. Food and housekeeping supplies**7. **\$250.00****8. Childcare and children's education costs**8. **\$226.00****9. Clothing, laundry, and dry cleaning**9. **\$100.00****10. Personal care products and services**10. **\$100.00****11. Medical and dental expenses**

11. \_\_\_\_\_

**12. Transportation** Include gas, maintenance, bus or train fare. Do not include car payments.12. **\$130.00****13. Entertainment, clubs, recreation, newspapers, magazines, and books**13. **\$100.00****14. Charitable contributions and religious donations**

14. \_\_\_\_\_

**15. Insurance.**

Do not include insurance deducted from your pay or included in lines 4 or 20.

15a. Life insurance

15a. \_\_\_\_\_

15b. Health insurance

15b. \_\_\_\_\_

15c. Vehicle insurance

15c. \_\_\_\_\_

15d. Other insurance. Specify: \_\_\_\_\_

15d. \_\_\_\_\_

**16. Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20.

Specify: \_\_\_\_\_

16. \_\_\_\_\_

**17. Installment or lease payments:**

17a. Car payments for Vehicle 1

17a. \_\_\_\_\_

17b. Car payments for Vehicle 2

17b. \_\_\_\_\_

17c. Other. Specify: \_\_\_\_\_

17c. \_\_\_\_\_

17d. Other. Specify: \_\_\_\_\_

17d. \_\_\_\_\_

**18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).**

18. \_\_\_\_\_

**19. Other payments you make to support others who do not live with you.**Specify: Child Support19. **\$224.00****20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**

20a. Mortgages on other property

20a. \_\_\_\_\_

20b. Real estate taxes

20b. \_\_\_\_\_

20c. Property, homeowner's, or renter's insurance

20c. \_\_\_\_\_

20d. Maintenance, repair, and upkeep expenses

20d. \_\_\_\_\_

20e. Homeowner's association or condominium dues

20e. \_\_\_\_\_

Debtor 1 Angel

First Name

L.

Middle Name

Moina

Last Name

Case number (if known) \_\_\_\_\_

21. Other. Specify: \_\_\_\_\_ 21. + \_\_\_\_\_

## 22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \_\_\_\_\_ \$3,365.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.

22b. \_\_\_\_\_

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \_\_\_\_\_ \$3,365.00

## 23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \_\_\_\_\_ \$3,270.40

23b. Copy your monthly expenses from line 22c above.

23b. - \_\_\_\_\_ \$3,365.00

23c. Subtract your monthly expenses from your monthly income.  
The result is your monthly net income.

23c. \_\_\_\_\_ (\$94.60)

## 24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage

 No. Yes.Explain here:  
None.

## Fill in this information to identify your case:

Debtor 1	<b>Angel</b> First Name	<b>L.</b> Middle Name	<b>Moina</b> Last Name
Debtor 2	<b>Jennifer</b> (Spouse, if filing) First Name	<b>Janet</b> Middle Name	<b>Moina</b> Last Name
United States Bankruptcy Court for the <b>SOUTHERN DISTRICT OF NEW YORK</b>			
Case number (if known)			

Check if this is an amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended

## Part 1: Summarize Your Assets

**Your assets**  
Value of what you own

## 1. Schedule A/B: Property (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B.....	<b>\$0.00</b>
1b. Copy line 62, Total personal property, from Schedule A/B.....	<b>\$4,900.00</b>
1c. Copy line 63, Total of all property on Schedule A/B.....	<b>\$4,900.00</b>

## Part 2: Summarize Your Liabilities

**Your liabilities**  
Amount you owe

## 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.....	<b>\$0.00</b>
---	---------------

## 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	<b>\$0.00</b>
---	---------------

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	<b>+ \$2,145,203.42</b>
--	-------------------------

**Your total liabilities**

**\$2,145,203.42**

## Part 3: Summarize Your Income and Expenses

## 4. Schedule I: Your Income (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I.....	<b>\$3,270.40</b>
---	-------------------

## 5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....	<b>\$3,365.00</b>
---	-------------------

Debtor 1 Angel L. Moina Pg 36 of 56 Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Part 4: Answer These Questions for Administrative and Statistical Records**

**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
 Yes

**7. What kind of debt do you have?**

**Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  
 **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the *Statement of Your Current Monthly Income*, copy your total current monthly income from Official Form 122A-1 Line 10R, Form 122B Line 10R, Form 122C-1 Line 14.** \_\_\_\_\_

**9. Copy the following special categories of claims from Part 4, line 6e, Schedule E/F:**

**Total claim**

**From Part 4 or Schedule E/F copy the following:**

9a. Domestic support obligations. (Copy line 6a.) \_\_\_\_\_

9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \_\_\_\_\_

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \_\_\_\_\_

9d. Student loans. (Copy line 6f.) \_\_\_\_\_

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \_\_\_\_\_

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \_\_\_\_\_

9g. **Total.** Add lines 9a through 9f. \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1	<b>Angel</b> First Name	<b>L.</b> Middle Name	<b>Moina</b> Last Name
Debtor 2	<b>Jennifer</b> (Spouse, if filing) First Name	<b>Janet</b> Middle Name	<b>Moina</b> Last Name
United States Bankruptcy Court for the <b>SOUTHERN DISTRICT OF NEW YORK</b>			
Case number (if known) _____			

Check if this is an amended filing

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are

**X /s/ Angel L. Moina**  
Signature of Debtor 1

Date 01/31/2016  
MM / DD / YYYY

**X /s/ Jennifer Janet Moina**  
Signature of Debtor 2

Date 01/31/2016  
MM / DD / YYYY

## Fill in this information to identify your case:

Debtor 1	<b>Angel</b> First Name	<b>L.</b> Middle Name	<b>Moina</b> Last Name
Debtor 2	<b>Jennifer</b> (Spouse, if filing) First Name	<b>Janet</b> Middle Name	<b>Moina</b> Last Name
United States Bankruptcy Court for the <b>SOUTHERN DISTRICT OF NEW YORK</b>			
Case number (if known) _____			<input type="checkbox"/> Check if this is an amended filing

## Official Form 107

**Statement of Financial Affairs for Individuals Filing for Bankruptcy**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages,

**Part 1: Give Details About Your Marital Status and Where You Lived Before**

## 1. What is your current marital status?

Married  
 Not married

## 2. During the last 3 years, have you lived anywhere other than where you live now?

No  
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:

Dates Debtor 1  
lived there

Debtor 2:

Dates Debtor 2  
lived there3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?  
(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No  
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1 Angel L. Moina Pg 39 of 56 Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

## Part 2: Explain the Sources of Your Income

### 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No

Yes. Fill in the details.

	Debtor 1	Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of the current year until	<input checked="" type="checkbox"/> Wages, commissions, <input type="checkbox"/> Operating a business	\$3,200.00	<input checked="" type="checkbox"/> Wages, commissions, <input type="checkbox"/> Operating a business	\$17,600.00
For the last calendar year: (January 1 to December 31 <u>2015</u> ) YYYY	<input checked="" type="checkbox"/> Wages, commissions, <input type="checkbox"/> Operating a business		<input checked="" type="checkbox"/> Wages, commissions, <input type="checkbox"/> Operating a business	\$8,971.00
For the calendar year before that: (January 1 to December 31 <u>2014</u> ) YYYY	<input checked="" type="checkbox"/> Wages, commissions, <input type="checkbox"/> Operating a business	\$21,900.00	<input checked="" type="checkbox"/> Wages, commissions, <input type="checkbox"/> Operating a business	\$42,300.00

### 5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security;

unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties;

and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under

No

Yes. Fill in the details.

	Debtor 1	Debtor 2		
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of the current year until	_____ _____ _____	_____ _____ _____	_____ _____ _____	_____ _____ _____
For the last calendar year: (January 1 to December 31 <u>2015</u> ) YYYY	_____ _____ _____	_____ _____ _____	_____ _____ _____	_____ _____ _____
For the calendar year before that: (January 1 to December 31 <u>2014</u> ) YYYY	_____ _____ _____	_____ _____ _____	_____ _____ _____	_____ _____ _____

Debtor 1 Angel L. Moina Pg 40 of 56 Case number (if known) \_\_\_\_\_

First Name Middle Name Last Name

Debtor 1	Debtor 2
<b>Sources of income</b> Describe below.	<b>Gross income from each source</b> (before deductions and exclusions) Describe below.
<b>Sources of income</b> (before deductions and exclusions)	
<p><b>From January 1 of the current year until</b></p> <hr/> <hr/> <hr/>	
<p><b>For the last calendar year:</b> (January 1 to December 31<u>2015</u> ) YYYY</p> <hr/> <p><b>Unemployment Compens</b> <u>\$6,396.00</u></p> <hr/> <hr/>	
<p><b>For the calendar year before that:</b> (January 1 to December 31<u>2014</u> ) YYYY</p> <hr/> <hr/>	

### Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

#### 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support

\* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support

Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
------------------	-------------------	----------------------	-------------------------

Debtor 1 Angel L. Moina Pg 41 of 56 Case number (if known) \_\_\_\_\_

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic

No

Yes. List all payments to an insider.

Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
------------------	-------------------	----------------------	-------------------------

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

No

Yes. List all payments that benefited an insider.

Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
------------------	-------------------	----------------------	-------------------------

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures**

**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody

No

Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title Maria Moina	Tax Case	Court Name Number Street	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case number _____		City _____ State _____ ZIP Code _____	
Case title NYS Tax Commissioner v. Angel Moina	Tax Case	Court Name Number Street	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case number _____		City _____ State _____ ZIP Code _____	
Case title NYS Tax Commissioner v. Maria J. Moina	Tax Case Warrant \$5338.00	Court Name Number Street	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case number _____		City _____ State _____ ZIP Code _____	

Debtor 1 Angel L. Moina Pg 42 of 56 Case number (if known) \_\_\_\_\_

First Name Middle Name Last Name

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

No. Go to line 11.

Yes. Fill in the information below.

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No

Yes. Fill in the details.

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of?

No

Yes

#### Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No

Yes. Fill in the details for each gift.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600

No

Yes. Fill in the details for each gift or contribution.

#### Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire,

No

Yes. Fill in the details.

#### Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

No

Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment made
--	---	-----------------------------------	------------------------

Victor J. Molina

Person Who Was Paid

930 Grand Concourse

Number Street

#1A

Bronx

NY

10451

City

State

ZIP Code

Email or website address

Person Who Made the Payment, if Not You

Debtor 1 Angel L. Moina Pg 43 of 56 Case number (if known) \_\_\_\_\_

First Name Middle Name Last Name

**17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to**

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

**18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than**

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property).

No

Yes. Fill in the details.

**19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)**

No

Yes. Fill in the details.

#### **Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

---

**20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?**

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage

No

Yes. Fill in the details.

**21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?**

No

Yes. Fill in the details.

**22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?**

No

Yes. Fill in the details.

#### **Part 9: Identify Property You Hold or Control for Someone Else**

---

**23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.**

No

Yes. Fill in the details.

Debtor 1 Angel L. Moina Pg 44 of 56 Case number (if known) \_\_\_\_\_

## Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental

No  
 Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

No  
 Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and

No  
 Yes. Fill in the details.

## Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
 A member of a limited liability company (LLC) or limited liability partnership (LLP)  
 A partner in a partnership  
 An officer, director, or managing executive of a corporation  
 An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Business Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
<u>GAVIOTA'S RESTAURANT AND SPO</u> Business Name	<u>Restaurant Bar</u>	
<u>600 WEST 142ND STREET</u> Number Street		<u>EIN:</u> _____ - _____ - _____ - _____ - _____
	Name of accountant or bookkeeper	Dates business existed
<u>New York</u> City		<u>From</u> _____ <u>To</u> <u>09/30/2014</u>
	State ZIP Code	

Debtor 1 Angel L. Moina Pg 45 of 56 Case number (if known) \_\_\_\_\_

First Name Middle Name Last Name

<b>Describe the nature of the business</b>			<b>Employer Identification number</b> Do not include Social Security number or ITIN.
<u>La Posada Restaurant &amp; Sports Bar</u> Business Name			<u>EIN:</u> _____ - _____ - _____ - _____ - _____
<u>600 WEST 142ND STREET</u> Number Street			<b>Dates business existed</b>
			<b>From</b> _____ <b>To</b> <u>09/30/2014</u>
<u>New York</u> City	<u>NY</u> State	<u>10031</u> ZIP Code	

**28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business?**  
Include

No  
 Yes. Fill in the details below.

**Part 12: Sign Below**

I have read the answers on the ~~Statement of Financial Affairs~~ any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years,

X /s/ Angel L. Moina  
Signature of Debtor 1  
Date 01/31/2016

X /s/ Jennifer Janet Moina  
Signature of Debtor 2  
Date 01/31/2016

Did you attach additional pages ~~to your Statement of Financial Affairs for Individuals Filing for Bankruptcy~~ (Official Form 107)?

No  
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No  
 Yes. Name of person \_\_\_\_\_ Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

## Fill in this information to identify your case:

Debtor 1	<b>Angel</b> First Name	<b>L.</b> Middle Name	<b>Moina</b> Last Name
Debtor 2	<b>Jennifer</b> (Spouse, if filing) First Name	<b>Janet</b> Middle Name	<b>Moina</b> Last Name
United States Bankruptcy Court for the <b>SOUTHERN DISTRICT OF NEW YORK</b>			
Case number (if known)			<input type="checkbox"/> Check if this is an amended filing

## Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

## Part 1: List Your Creditors Who Hold Secured Claims

1. For any creditors that you listed in Part **Schedule D: Creditors Who Hold Claims Secured by Property** (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
---	---	---

None.

## Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in **Schedule G: Executory Contracts and Unexpired Leases** (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will this lease be assumed?
--	-----------------------------

None.

## Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

**X** /s/ Angel L. Moina

Signature of Debtor 1

Date 01/31/2016  
MM / DD / YYYY

**X** /s/ Jennifer Janet Moina

Signature of Debtor 2

Date 01/31/2016  
MM / DD / YYYY

UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF NEW YORK  
MANHATTAN DIVISION

In re Angel L. Moina  
Jennifer Janet Moina

Case No. \_\_\_\_\_

Chapter 7 \_\_\_\_\_

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	<b>\$900.00</b>	
Prior to the filing of this statement I have received.....	<b>\$900.00</b>	(See Attachment)
Balance Due.....	<b>\$0.00</b>	

2. The source of the compensation paid to me was:

Debtor  Other (specify)

3. The source of compensation to be paid to me is:

Debtor  Other (specify)

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

01/31/2016

*Date*

**/s/ Victor J. Molina**

*Victor J. Molina*  
Law Office of Victor J. Molina  
930 Grand Concourse  
Bronx, NY 10451  
Phone: (718) 401-1600 / Fax: (718) 401-1611

Bar No.

**/s/ Angel L. Moina**  
*Angel L. Moina*

**/s/ Jennifer Janet Moina**  
*Jennifer Janet Moina*

UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF NEW YORK  
MANHATTAN DIVISIONIN RE: Angel L. Moina  
Jennifer Janet Moina

CASE NO

CHAPTER 7

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 1/31/2016Signature */s/ Angel L. Moina*  
*Angel L. Moina*Date 1/31/2016Signature */s/ Jennifer Janet Moina*  
*Jennifer Janet Moina*

142 BROADWAY ASSOCIATES, L.L.C.  
c/o HEIBERGRR & ASSOCIATES, P.C.  
589 Eighth Avenue, 10th floor  
New York, NY 10018

3480-3496 Broadway Assoc.  
c/o Cullen & Troia, P.C.  
2 Rector Street, Ste. 903  
New York, NY 10006

AMERICAN EXPRESS

Capital One  
26525 N RIVERWOODS BLVD  
Lake Forest, IL 60045

CAPITAL ONE BANK USA N  
15000 CAPITAL ONE DR  
Henrico, VA 23238

CHASE CARD  
PO Box 15298  
Wilmington, DE 19850

GIBLIN & LYNCH  
10 Garber Square  
Ste. 2  
Ridgewood, NJ 07450

MCYDSNB  
9111 DUKE BLVD  
Mason, OH 45040

New York and Presbyterian Hospital  
161 Fort Washington Ave # 206  
New York, NY 10032

New York State Tax and Finance  
Building 9  
W.A, Harriman Campus  
Albany, NY 12229

New York State Tax and Finance  
Building 9  
W.A. Harriman Campus  
Albany, NY 12229

NEW YORK STATE WORKERS' COMPENSATION BOA  
FINANCE OFFICE. ASSESSMENT UNIT  
328 STATE ST. RM 331  
SCHEECTADY. NY 12305

NYS DEPT OF LABOR  
Averell Harriman State Office Campus  
Building 12, Room 116  
Albany, NY 12240

PORTFOLIO RECOVERY ASS  
120 CORPORATE BLVD STE 1  
Norfolk, VA 23502

## Fill in this information to identify your case:

Debtor 1	<b>Angel</b> First Name	<b>L.</b> Middle Name	<b>Moina</b> Last Name
Debtor 2 (Spouse, if filing)	<b>Jennifer</b> First Name	<b>Janet</b> Middle Name	<b>Moina</b> Last Name
United States Bankruptcy Court for the <b>SOUTHERN DISTRICT OF NEW YORK</b>			
Case number (if known)			

Check if this is an amended filing

## Official Form 122A-1Supp

## Statement of Exemption from Presumption of Abuse Under § 707(b)(2)

12/15

File this supplement together with Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1), if you believe that you are exempted from a presumption of abuse. Be as complete and accurate as possible. If two married people are filing together, and any of the exclusions in this statement applies to only one of you, the other person should complete a separate Form 122A-1 if you believe that this is required by 11 U.S.C. § 707(b)(2)(C).

## Part 1: Identify the Kind of Debts You Have

1. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family or household purpose." Make sure that your answer is consistent with the answer you gave at line 16 of the Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101).

No. Go to Form 122A-1; on the top of page 1 of that form, check *There is no presumption of abuse*, sign Part 3. Then submit this supplement with the signed Form 122A-1.

Yes. Go to Part 2.

## Part 2: Determine Whether Military Service Provisions Apply to You

2. Are you a disabled veteran (as defined in 38 U.S.C. § 3741(1))?

No. Go to line 3.

Yes. Did you incur debts mostly while you were on active duty or while you were performing a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).

No. Go to line 3.

Yes. Go to Form 122A-1; on the top of page 1 of that form, check *There is no presumption of abuse*, sign Part 3. Then submit this supplement with the signed Form 122A-1.

3. Are you or have you been a Reservist or member of the National Guard?

No. Complete Form 122A-1. Do not submit this supplement.

Yes. Were you called to active duty or did you perform a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1)

No. Complete Form 122A-1. Do not submit this supplement.

Yes. Check any one of the following categories that applies:

I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.

I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on \_\_\_\_\_ which is fewer than 540 days before I file this bankruptcy case.

I am performing a homeland defense activity for at least 90 days.

I performed a homeland defense activity for at least 90 days, ending on \_\_\_\_\_, which is fewer than 540 days before I file this bankruptcy case.

If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, *The Means Test does not apply*, and sign Part 3. Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The exclusion period means the time you are on active duty or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).

If your exclusion period ends before your case is closed, you may have to file an amended form later.

## Fill in this information to identify your case:

Debtor 1	<b>Angel</b> First Name	<b>L.</b> Middle Name	<b>Moina</b> Last Name
Debtor 2	<b>Jennifer</b> (Spouse, if filing) First Name	<b>Janet</b> Middle Name	<b>Moina</b> Last Name
United States Bankruptcy Court for the <b>SOUTHERN DISTRICT OF NEW YORK</b>			
Case number (if known)			

## Check one box only as directed in this form and in Form 122A-1Supp:

1. There is no presumption of abuse.

2. The calculation to determine if a presumption of abuse applies will be made under

3. The Means Test does not apply now because of qualified military service but it could

Check if this is an amended filing

## Official Form 122A-1

## Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

## Part 1: Calculate Your Current Monthly Income

## 1. What is your marital and filing status? Check one only.

**Not married** Fill out Column A, lines 2-11.

**Married and your spouse is filing with you** Fill out both Columns A and B, lines 2-11.

**Married and your spouse is NOT filing with you. You and your spouse are:**

- Living in the same household and are not legally separated** Fill out both Columns A and B, lines 2-11.
- Living separately or are legally separated** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you

**Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.** 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental

Column A Debtor 1	Column B Debtor 2 or non-filing spouse
----------------------	--

2. **Your gross wages, salary, tips, bonuses, overtime, and commissions** (before all payroll deductions) \_\_\_\_\_

3. **Alimony and maintenance payments** Do not include payments from a spouse if Column B is filled in. \_\_\_\_\_

4. **All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support** regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from

Debtor 1 Angel  
First NameL.  
Middle NameMoina  
Last Name

Case number (if known) \_\_\_\_\_

**Column A**  
**Debtor 1****Column B**  
**Debtor 2 or**  
**non-filing spouse****5. Net income from operating a business, profession, or farm****Debtor 1**      **Debtor 2**Gross receipts (before all  
deductions) \_\_\_\_\_

Ordinary and necessary operating \_\_\_\_\_ - \_\_\_\_\_

Net monthly income from a business, \_\_\_\_\_  
profession, or farm \_\_\_\_\_**Copy  
here ➔****6. Net income from rental and other real property****Debtor 1**      **Debtor 2**Gross receipts (before all  
deductions) \_\_\_\_\_

Ordinary and necessary operating \_\_\_\_\_ - \_\_\_\_\_

Net monthly income from rental or \_\_\_\_\_  
other real property \_\_\_\_\_**Copy  
here ➔****7. Interest, dividends, and royalties****8. Unemployment compensation**Do not enter the amount if you contend that the amount received was a  
benefit under the Social Security Act. Instead, list it here: .....↓

For you..... \_\_\_\_\_

For your spouse..... \_\_\_\_\_

**9. Pension or retirement income** Do not include any amount received that  
was a benefit under the Social Security Act. \_\_\_\_\_**10. Income from all other sources not listed above** Specify the source and  
amount. Do not include any benefits received under the Social  
Security Actor payments received as a victim of a war crime, a crime against  
humanity,

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Total amounts from separate pages, if any.

+ \_\_\_\_\_ + \_\_\_\_\_

**11. Calculate your total current monthly income.**  
Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

_____	+	_____	=	_____
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**Total current  
monthly income**

First Name Middle Name Last Name

**Part 2: Determine Whether the Means Test Applies to You****12. Calculate your current monthly income for the year** Follow these steps:12a. Copy your total current monthly income from line 11.....**Copy line 11 here ➔** 12a. 

Multiply by 12 (the number of months in a year).

X 12

12b. The result is your annual income for this part of the form.

12b. **13. Calculate the median family income that applies to you** Follow these steps:Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of household..... 13. 

To find a list of applicable median income amounts, go online using the link specified in the separate

**14. How do the lines compare?**14a.  Line 12b is less than or equal to line 13. On the top of page 1, check There is no presumption of abuse.  
Go to Part 3.14b.  Line 12b is more than line 13. On the top of page 1, check The presumption of abuse is determined by Form 122A-2.  
Go to Part 3 and fill out Form 122A-2.**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

**X /s/ Angel L. Moina**

Signature of Debtor 1

**X /s/ Jennifer Janet Moina**

Signature of Debtor 2

Date 1/31/2016

MM / DD / YYYY

Date 1/31/2016

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

**Current Monthly Income Calculation Details**

In re: **Angel L. Moina**  
**Jennifer Janet Moina**

Case Number:  
Chapter: **7**